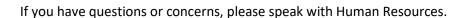
MONTHLY EMPLOYEE CONTRIBUTIONS

Board of Public Works





BOARD OF PUBLIC WORKS MEDICAL COVERAGE	
Employee Only	100% Employer-Paid
Family	\$258.49

BOARD OF PUBLIC WORKS DENTAL COVERAGE	
Employee Only	100% Employer-Paid
Employee + Spouse	\$6.54
Employee + Child(ren)	\$6.67
Family	\$13.21

VISION COVERAGE	
Employee Only	\$7.40
Employee + Spouse	\$11.84
Employee + Child(ren)	\$12.09
Family	\$19.49

LIFE COVERAGE	BASIC
Employee Only	100% Employer-Paid

DISABILITY COVERAGE	LONG-TERM
Employee Only (only Fire and Police personnel)	100% Employer-Paid